

# Diabetic Risk Assessment

## Diabetic Foot Ulcer Prevention Recommendations Based on CHECK Findings

### Check

**C**

1. Does the patient have signs of diminished sensation?
2. Is there a foot deformity (bunion, hammertoes, etc)?
3. Are there any pre-ulcerative skin lesions (callus, corn)?
4. Is Onychomycosis present?
5. Do they have a circulatory disease?
6. Do they currently have (or historically have had) an ulcer, amputation or neuropathic fracture?

### Protect

**P**

If there is an acute concern (e.g. erythema, infection, ischemia, Charcot), the patient's foot shall be immediately protected (off-loading / non-weight bearing / wound care / antibiotic therapy). Ensure referral to the appropriate specialist (Foot Specialist +/- Vascular Surgeon) immediately.

### Refer

**R**

If YES to any of the CHECK questions, then referral to a Foot Specialist shall be made.

Foot Specialists at BioPed can offload and prevent ulcerations. We offer lower limb solutions for patients suffering from pre-ulcerative lesions, deformity, neuropathy, peripheral vascular disease, Charcot and wounds.

At select clinics, Chiropodists and Footcare Nurses will also provide skin and nail care, treat infections and manage Onychomycosis.

**0**

Low

Normal  
plantar  
sensation

Solution:

Professionally  
fitted footwear**1**

Moderate

Loss of  
protective  
sensation  
(LOPS)

Solution:

Custom made  
orthotics

If unable  
to obtain a  
custom device,  
choose a  
moulded or  
off-the-shelf  
orthotic

**2**

High

LOPS with  
either high  
pressure  
or poor  
circulation,  
structural foot  
deformities or  
Onychomycosis

Solution:

Custom made  
orthotics,  
placed in  
diabetic /  
orthopedic  
footwear.

Footwear  
modifications  
as needed (e.g.  
rocker sole)

**3**

Very High

History of  
ulceration,  
amputation or  
neuropathic  
fracture

Solution:

Cast walker,  
total contact  
cast (TCC), or  
cast shoe